## FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

## **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committee of JAN 19 for state office must be filed electronically and effective January 1, 2012, all JAN 19 statements and reports filed by all committees for state office must be filed electronically. Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically. Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) ELECT NATHAN FORM DR-2 IMPORTANT: Indicate by # type of committee you are reporting for:

[1] Statowido Logistative Judge Stonding for Retention Condidate (2) State PAC (3) State Party

[4] County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other PAC (10) School Board Other PAC (10) School Bo DISCLOSURE (Rev. 12/2009) REPORT or Office Use Only 11 \ Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Logged In. Candidate Name Political Party (if applicable) Scanned NATHAN BROWN Computer Office Sought District (if Senate or House) Audited ALDERMAN. Late reports are subject to possible civil and criminal penalties. Pursuant to towa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a condidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. wan 563 386.2672. SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED 12-31-10 I AM FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. indicate by # 2 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 20.0Z of the last reporting period or must be zero if this is first report filed.) ..... ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ...... Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 05.0Z SUB-TOTAL ..... \$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)...... Schodule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$ \*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... \*IN KIND CONTRIBUTIONS (From Schedule E - Altach Schedule E)...... \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

COMMITTEE NAME (Must be same as on Statement of Organization)

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## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NOING FORM

VOICES	To Euro	1 NA	14AN B	No-WN				
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	. (	EXPĒNDI (Disbursement)	WAS MADE		PURPI SCRIBE TR	ose Ansactión)	AMOUNT EXPENDED
118110 10 315110	ID# CK#	Wed Gbb DES	S PARGO WALKUT MOINES	3 BANC 1 ST JA 50309	BANK	Serv.	CHATTALS	\$ 22.47
4/1/10 70 4/1/10	ID#	cı		4	Ct	4	ş	72.47
10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CK#	q	le	C <sub>I</sub>	4	ч	C/	27.30
10/7/10 76 12/10	ID# CK#	u	c,	4	(c	Ç	61	27.30
	ID#							
	ID#							
	ID# CK#					•		
	ID# CK#							
					<u> </u>	:	SUB-TOTAL	\$ 9954

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, adventising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 68A.402(3)(i).)

TOTAL (if last page of this schedule)

R INSTRUCTIO			RESET	SCHEDULE
MMITTEE NAM	E(Must be same as on Si	atement of Organization)		F LOAN
losces 1	L ELECT PATH	N BROWN		(Rev. 02/08) RECEIV & REPA
		to the committee which is deposited in		CHECK THIS BOX
TAL UNPAID LO	Dans from <u>last</u> repo	ORTING PERIODS 1, 235	.00	
RT I - MONETA (Original :	ARY LOANS RECEIVED 1 source of loan, such as a	<u>'HIS</u> REPORTING PERIOD bank, must be shown if a third parly is	involved. Include loans from candide	de's personal funds.)
DATE RECEIVED (MM/DD/YR)	(Include E	ND ADDRESS OF LENDER Indorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable")	AMOUNT OF LOAN
3/8/10	NATHAN BROWN 915 CAMMAR	U ZON		\$
	DAVENPORT,	14 57864	CANDEDATE	35.00
8/9/10	4 4	~	(r	35.00 20.00
roletro	a q	R	le	30.00
RT II - MONET. (Loans fo	ARY LOAN REPAYMEN orgiven must be reported (	TS MADE <u>THIS</u> REPORTING PERIOD on Schedule E — In-kind Contributions.		s_ <i>85.00</i> _
RT II - MONET. (Loans &  DATE PAID (MM/DD/YR)	NAME AN	on Schedule E — In-kind Contributions.	RELATIONSHIPTO	AMOUNT PEDAIO
DATE PAID	NAME AN	on Schedule E — In-kind Contributions.	)	AMOUNT PEDAIO
DATE PAID	NAME AN	on Schedule E — In-kind Contributions.	RELATIONSHIPTO	AMOUNT REPAID
DATE PAID	NAME AN	on Schedule E — In-kind Contributions.	RELATIONSHIPTO	AMOUNT REPAID
DATE PAID	NAME AN	on Schedule E — In-kind Contributions.	RELATIONSHIPTO	AMOUNT REPAID
DATE PAID	NAME AN	on Schedule E — In-kind Contributions.  ID ADDRESS OF LENDER  dorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
DATE PAID	NAME AN	on Schedule E - In-kind Contributions.  ID ADDRESS OF LENDER  dorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)  REPAYMENTS (PART II)  AL LOANS FORGIVEN	AMOUNT REPAID  \$